



# Water Quality Program

## Permit Submittal Electronic Certification

**Permittee:** TACOMA RAIL

**Permit Number:** WAR001318

**Site Address:** 2601 SR 509 N Frontage Rd  
TACOMA, WA98421

**Submittal Name:** ISGP Annual Gross Revenue Form

**Version:** 1

**Due Date:** 3/15/2023

### Questionnaire

Number	Permit Section	Question	Answer
1	S11	Permit Number	WAR001318
2	S11	Company Name	Tacoma Public Utilities
3	S11	Site Name	TACOMA RAIL
4	S11	Billing Contact's First and Last Name	Lori Duval
5	S11	Billing Contact's Mailing Address	2601 SR 509 N Frontage Rd, Tacoma, WA, 98421
6	S11	Billing Contact's Phone Number	2535028897
7	S11	Billing Contact's Email Address	lduval@cityoftacoma.org
8	S11	Are you a Municipality or Publically-owned Entity?	Yes

*I certify under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.*

James Bozic

4/11/2023 8:55:01 AM

Signature

Date